24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FAIR SHARE ACTION	C C00526673
Check if 24-hour report 48-hour report New report Amends report filed	d on Man / Dab / Yayayay
Full Name of Payee GRASSROOTS VOTER OUTREACH	Date of Public Distribution/Dissemination
Mailing Address 59 TEMPLE PLACE	10 26 2014
	Amount
City State Zip Code	27500.00
BOSTON MA 02108	Transaction ID : SE.5159 Date of Disbursement or Obligation
Purpose of Expenditure Phonebanking services Category/ Type 003	10 / 27 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Mark E Udall Oppose	President State: CO
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
	Tunica.
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Type	M M / D D / Y Y Y Y
	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	27500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	27500.00
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	10 27 2014
Signature	